

## **OPPOSITION TO**

**Saint Thomas Rutherford Hospital at Westlawn**

Project No. CN2004-007

**TriStar StoneCrest Medical Center**

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## St. Thomas Rutherford Hospital at Westlawn (“STRH-W”) CON Should Be Denied

### 1. No Need

- Not consistent with review criteria - more ED rooms not needed
- No improvement in access to inpatient or ED services
- Projected inpatient census does not support even 8 beds
- “Neighborhood hospital” (micro-hospital) concept is inappropriate for Rutherford County
- Utilization projections not reasonable

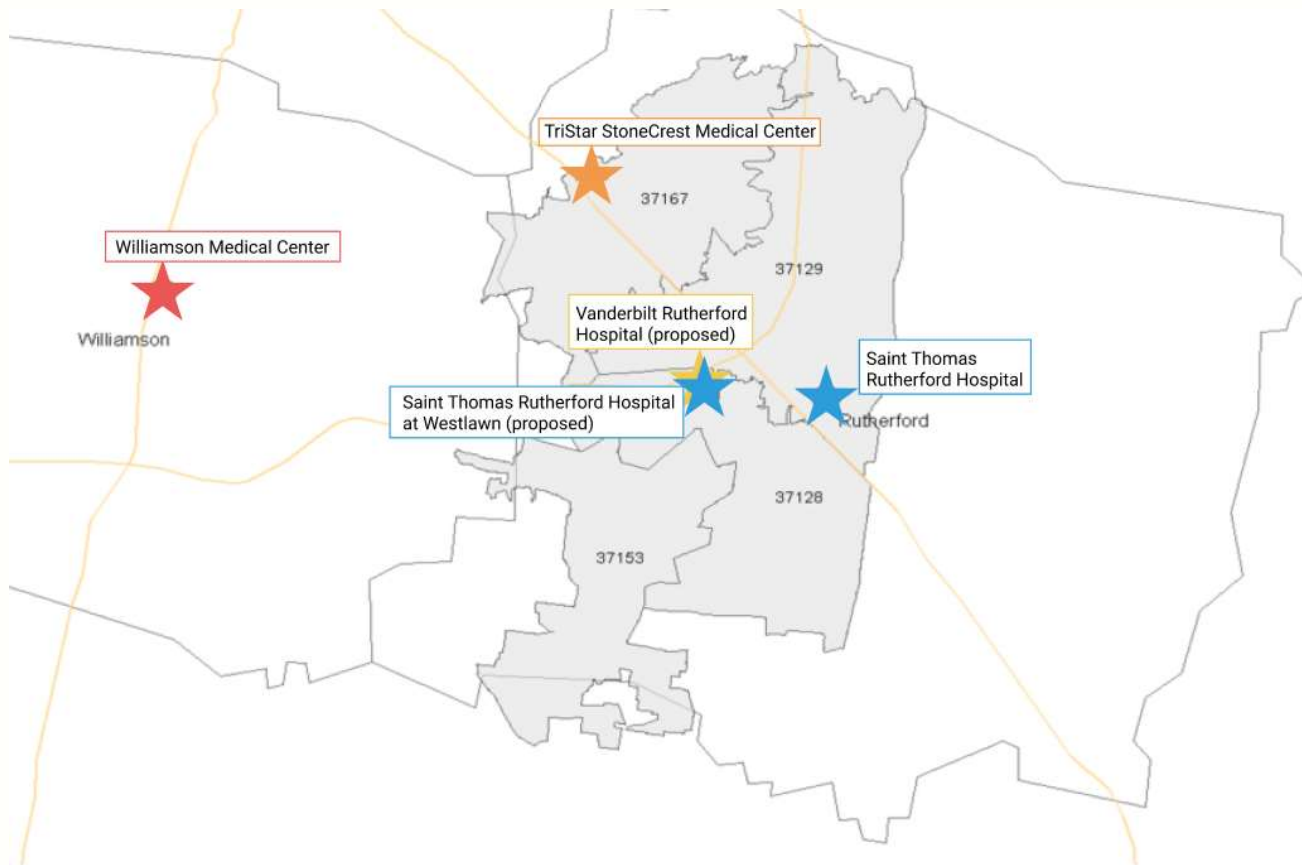
### 2. Not Orderly Development

- Essentially a freestanding emergency department (“FSED”), which is not needed.
- Harm to existing providers
  - ✓ TriStar StoneCrest Medical Center (“StoneCrest”)
  - ✓ Saint Thomas Rutherford Hospital (“STRH”)
  - ✓ Williamson Medical Center (“WMC”)

### 3. Not Economically Feasible

- Project cost of \$24.6 million is too high for the scope services proposed
- Even so, the facility design omits required elements
- Less costly and more effective alternatives are available, but not considered
- Overall feasibility of the project is in question.

## I. No Need



## I. No Need

### **STRH-W's ED Services are not needed**

- Only 4.4 miles from STRH main campus.
- Primary activity is provision of ED services.
  - ❖ 86% of total revenue from ED services.  
Supp. 2, p. 7 (April 30, 2020)
- STRH-W's projected acuity of ED patients resembles a FSED more than hospital ED.
  - ❖ 47% in Levels 4 & 5, least acute categories.
- Only 2.3% of ED patients are expected to require inpatient admissions, which is more typical of a FSED. (Application, p. 33)

#### **Westlawn Satellite Hospital**

<b>Triage Status</b>	
Immediate (Level 1)	1%
Emergent (Level 2)	7%
Urgent (Level 3)	45%
Semiurgent (Level 4)	32%
Nonurgent (Level 5)	15%

*Source: STRH-W application, p. 34*

## I. No Need

# ED Visits Are Not Growing in Rutherford County

- **No growth** in total ED treatments at Rutherford County hospitals in recent years.
- **STRH's ED visits declined in 2018** when StoneCrest opened additional treatment rooms.
  - ❖ **STRH's ED visits declined further in 2019** to 82,917 (Application, p.28)
- **No need** for the 8 ED treatment rooms proposed for STRH-W.

## Emergency Department Visits At Rutherford County Hospitals

Hospital	2016	2017	2018
STRH	84,918	87,904	85,914
StoneCrest	52,149	51,921	51,232
Total	137,067	139,825	137,146

Source: JARs

I. No Need

**ED Utilization Rates are Low in STRH-W's Primary Service Area**

<b>Primary Service Area ZIP Codes</b>	<b>2019 ED Visits per 1,000 Population</b>
37128	267.7
37129	345.5
37153	243.4
37167	424.8
<b>Total PSA</b>	<b>340.5</b>
Rutherford County	361.6
Tennessee	423.8

Sources: STRH-W application, p. 31 for Tennessee rate; THA discharge data; US Census and Claritas population

## I. No Need

### **STRH-W's ED Services are not needed**

- STRH-W's Supplemental Information (p. 5) indicates that StoneCrest has significant available ED capacity based on pre-COVID levels of utilization.
- Supplemental information (p. 4) states:  
*"By providing emergency department ('ED') services closer to where patients live and work, the Westlawn Satellite Hospital ED will reduce critical travel time for emergency services. This is especially important for heart attack and stroke patients, where every minute counts."*
- Stroke and heart attack patients would be better served with transport to a full-service hospital with interventional capabilities in the community.
- No showing that more patients live nearer to STRH-W than STRH or StoneCrest.

## I. No Need

# No Improvement in Access to Inpatient Services

➤ Proposed STRH-W inpatient services include a **narrow range of services.**

- Acute abdominal pain
- Allergic reactions
- Asthma and breathing problems
- Broken bones
- Burns
- Chest pain
- Dehydration
- Foreign-object removal
- Headache
- Head injuries
- Infection
- Acute pain control (no chronic pain mgt)
- Pneumonia
- Rashes, insect bites, stings
- Lacerations
- Sprains and broken bones

➤ Services **exclude** surgical services, which severely limits types of patients served.

➤ Only **2.2%** of the ED visits will result in inpatient admissions.



## I. No Need

### STRH-W's Projected ED Utilization is Unreasonable

- STRH-W projects 12,748 ED visits in Year 1 and 15,557 in Year 2.
- The bases for these projections are seriously flawed.
- Despite the fact that Rutherford County hospitals have had no significant growth in recent years, STRH-W projects that Rutherford County ED visits will:
  - ❖ Increase by 5,025 visits between 2018 and 2020
  - ❖ Increase by 11,260 visits between 2020 and 2024
  - ❖ Total projected increase between 2018 and 2024 = 16,285 visits  
(Application, p. 31)
- STRH-W's impact analysis relies heavily on this growth, which is unlikely to be realized. Remember: **ED visits are down despite population growth.**
- STRH-W ED volume will come from existing providers, including StoneCrest.

### I. No Need

## **STRH-W's Projected Inpatient Utilization is Unreasonable**

- No evidence that a “neighborhood hospital” is needed in Rutherford County.
- Proposed scope of inpatient services so limited at STRH-W that few patients will benefit from the facility.
- 72 CON-approved beds coming in service at STRH will absorb inpatient utilization from population growth for the foreseeable future.
- Sufficient ED treatment rooms at StoneCrest and STRH to meet need.

## I. No Need

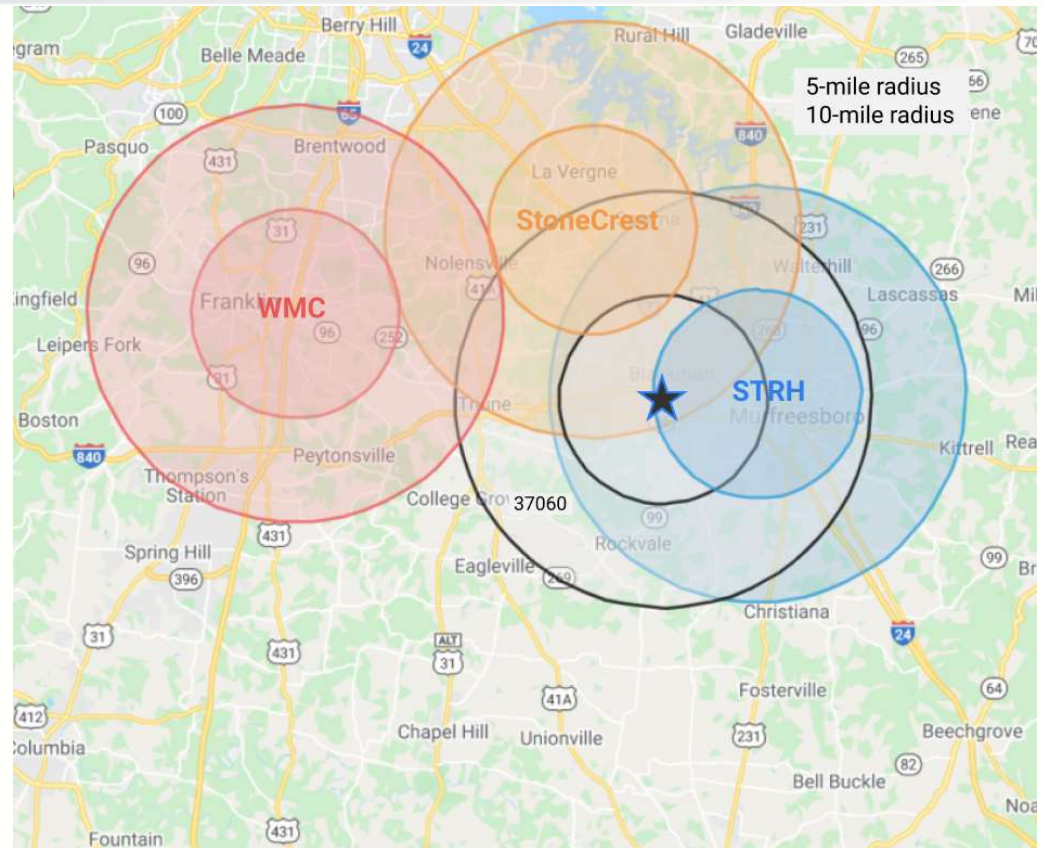
# STRH-W's Project Will Not Address The Pandemic

- The proposed facility would not be open until at least 2022.
- An 8-bed inpatient facility cannot care for critically ill COVID patients requiring ICU and ventilation support.
- ED volumes down 30% nationwide in 2020.

## II. Not Orderly Development

### StoneCrest and Other Hospitals will be Harmed by STRH-W

- No material increase to access.
  - STRH main campus just a 4.4 miles away.
  - StoneCrest and WMC close by.
- Significant overlap with StoneCrest.
  - STRH projects 7.45% patients from StoneCrest ED visits -- **impact will likely be much higher.**
  - 48% of StoneCrest's inpatient discharges were from STRH-W's 4-ZIP Code service area.
- Same license/charge master as STRH – **no savings to patients.**
- Small sliver in 10-mile radius not within 10 miles of an existing ED is largely zip code 37060, which is not part of the proposed service area.



### III. Not Economically Feasible

- Economic feasibility unlikely with 20% inpatient occupancy rate
  - 1.7 patients ADC in Year 1 & 2.1 in Year 2
- Staffing unrealistically low (30.2 FTEs) to accommodate ED and hospital services.
- Project costs are too high.
- Unrealistic representation of the cost to build project as proposed.
- Very small footprint (14,650 sf).



## Alternatives Available & Not Considered

- The cost for an on-campus ED expansion is a more cost-effective alternative.
  - STRH main campus can easily accommodate 8 additional ED beds
  - Approximate savings of **\$15 million**
  - Maintaining inpatient services on STRH existing campus far superior to constructing a small, low acuity hospital with limited census.



## CON SHOULD BE DENIED

### No Need for the STRH-W Project

- Neighborhood hospital concept serves no purpose in Rutherford County
- No meaningful improvement in access to Inpatient or ED services
- Unreasonable utilization projections for proposed ED

### The STRH-W Project is Not Orderly Development

- Will adversely impact existing providers in service area
- Fragment inpatient services offered by STRH for no health planning purpose

### The STRH-W Project is Not Economically Feasible

- Superior, less costly alternatives to construction of the proposed project
- Financial projections are based on unreasonable volume projections, staffing levels, and capital costs